

Message Text

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ACTION AF-10

INFO OCT-01 ISO-00 DHA-05 CIAE-00 DODE-00 PM-05 H-01

INR-07 L-03 NSAE-00 NSC-05 PA-01 PRS-01 SP-02

SS-15 USIA-06 TRSE-00 IO-13 EUR-12 AID-05 /092 W

-----090354 220609Z /10

R 211445Z OCT 77

FM AMCONSUL DURBAN

TO SECSTATE WASHDC 2702

INFO AMEMBASSY PRETORIA

AMCONSUL CAPE TOWN

AMCONSUL JOHANNESBURG

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EO 11652: GDS

TAGS: PINT SHUM SF

SUBJ: EFFECT OF BANNING ON BCP PROJECTS AND PERSONNEL

1. IN WAKE OF THE BANNING OF THE BLACK COMMUNITY PROGRAMS (BCP) I SPOKE WITH THE NATIONAL CHAIRMAN OF THE BCP, H.J. BHENGU, AND ITS NATIONAL EXECUTIVE DIRECTOR, B.A. KHOAPA. ASIDE FROM THEIR PREDICTABLE POLITICAL REACTIONS OF OUTRAGE AND DESPAIR THEY OUTLINED FOR ME SOME OF THE PRACTICAL ECONOMIC AND SOCIAL CONSEQUENCES OF THE BANNING TO BLACK PEOPLE AND TO THE BPC PROJECTS. FYI: BCP CONSIDERED ITSELF AS BASICALLY THE SOCIAL WELFARE ARM OF BPC WITHOUT ANY POLITICAL ROLE. END FYI

2. THE BCP ESTIMATED THAT OVER R400,000 (\$460,000) IN CASH, BUILDINGS, FURNITURE, MEDICAL EQUIPMENT, AUTOMOBILES AND SUNDRY MATERIAL WOULD BE CONFISCATED BY THE SAG. MR. BHENGU, AN ATTORNEY, SAID THE PROCESS WAS AKIN TO LEGAL LIQUIDATION, WITH THE STATE APPOINTED AS EXECUTOR AND LIQUIDATOR. HE SAID BCP HAD TWO LARGE, WELL ESTABLISHED PROJECTS, A R175,000 COMMUNITY HEALTH CENTER AT ADAMS MISSION OUTSIDE DURBAN AND

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A R75,000 HEALTH CENTER AT ZANEMPILO, OUTSIDE KING WILLIAM'S TOWN, AS WELL AS SEVERAL SMALLER PROJECTS IN NATAL AND EASTERN CAPE, SOWETO AND TRANSKEI. BCP ALSO HAD PLANS TO CONSTRUCT A R120,000 HEALTH CENTER IN SOWETO AND SOME MEDICAL EQUIPMENT FOR THIS PROJECT WAS ALREADY ENROUTE TO SA FROM ENGLAND. MR. BHENGU STATED THAT WITH THE BANNING OF BCP THERE WAS LITTLE EXPECTATION THAT THESE CAPITAL ITEMS COULD BE RETAINED

FOR USE IN THE BLACK COMMUNITY AS THE SAG ALONE HAS THE RIGHT TO DETERMINE THEIR DISPOSITION. HE WAS DISMAYED AT THIS LOSS, AND AT THE REPERCUSSIONS AMONG THE RECIPIENTS OF THE SOCIAL SERVICES PROVIDED BY THESE CENTERS. HE SAID, THAT HE COULD NOT UNDERSTAND THE SAG CLOSING DOWN A PROJECT THAT TAUGHT PEOPLE HOW TO MAKE LEATHER GOODS OR ARTS AND CRAFT, NOT TO MENTION PROVIDING MEDICAL SERVICES TO A COMMUNITY. MR. BHENGU SAID THE PRACTICAL EFFECT OF THE BANNINGS TO PATIENTS OF THE HEALTH CENTERS WOULD BE TO LOWER THE QUALITY OF THEIR HEALTH CARE. THEY COULD STILL GO TO SAG HOSPITALS FOR MAJOR PROBLEMS BUT THE BCP CLINICS HAD PROVIDED MEDICAL CHECK-UPS, PRE-NATAL CARE, DIAGNOSTIC SERVICES AND SOME PREVENTIVE MEDICINE TO A PEOPLE TO WHOM SUCH THINGS WERE GENERALLY UNKNOWN. THIS, HE SAID COULD NOT BE REPLACED AT THE OVER-CROWDED GOVERNMENT HOSPITALS. ALSO HE BELIEVED THAT MANY OF THEIR TRAINED BLACK MEDICAL STAFF WOULD REFUSE TO WORK FOR THE SAG IN ANY FORM AND THIS MENT THEIR SERVICES WOULD BE LOST TO THE COMMUNITY SINCE HE SAW LITTLE PROSPECT NON-GOVERNMENTAL ORGANIZATIONS WOULD OFFER TO TAKE OVER THE FACILITIES.

3. MR. GHENGU WAS DISTRESSED OVER WHAT WOULD BECOME OF BCP'S STAFF. BCP HAD ANTICIPATED THAT VARIOUS OF THE STAFF MEMBERS MIGHT THEMSELVES BE BANNED AND HAD SIGNED THEM TO LONG-TERM CONTRACTS THAT INSURED THEY WOULD BE PAID EVEN IF THEIR BANNING PROHIBITED THEM FROM WORKING WITH BCP. HE SAID LIMITED OFFICIAL USE

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THEY NEVER EXPECTED BCP ITSELF TO BE BANNED. THIS MENT ALL BANK ACCOUNTS WERE TAKEN OVER BY THE SAG AND THERE WERE NO FUNDS TO CONTINUE THE SALARIES OF THE STAFF. MOST AFFECTED BY THIS, HE SAID, WAS MR. KHOAPA, WHO IS IN THE FOURTH YEAR OF HIS BANNING BUT WHO WAS PERMITTED BY THE SAG TO CONTINUE AS EXECUTIVE DIRECTOR OF BCP DURING THIS TIME AS LONG AS HE REMAINED IN THE DURBAN TOWNSHIP OF UMLAZI. BCP THEREFORE MOVED ITS NATIONAL HEADQUARTERS TO UMLAZI AND THE EXCEPTIONALY ABLE MR. KHOAPA CONTINUED TO DIRECT THE BCP FROM THERE. MR. KHOAPA CANNOT LEAVE UMLAZI AND THERE ARE FEW JOB OPPORTUNITIES FOR HIM IN THE ESSENTIALLY RESIDENTIAL LOCATION. FUGIT

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Message Attributes

Automatic Decaptioning: X
Capture Date: 01-Jan-1994 12:00:00 am
Channel Indicators: n/a
Current Classification: UNCLASSIFIED
Concepts: PROGRAMS (PROJECTS), PUBLIC ADMINISTRATION
Control Number: n/a
Copy: SINGLE
Sent Date: 21-Oct-1977 12:00:00 am
Decaption Date: 01-Jan-1960 12:00:00 am
Decaption Note:
Disposition Action: RELEASED
Disposition Approved on Date:
Disposition Case Number: n/a
Disposition Comment: 25 YEAR REVIEW
Disposition Date: 22 May 2009
Disposition Event:
Disposition History: n/a
Disposition Reason:
Disposition Remarks:
Document Number: 1977DURBAN00703
Document Source: CORE
Document Unique ID: 00
Drafter: n/a
Enclosure: DG ALTERED
Executive Order: N/A
Errors: N/A
Expiration:
Film Number: D770389-0082
Format: TEL
From: DURBAN
Handling Restrictions: n/a
Image Path:
ISecure: 1
Legacy Key: link1977/newtext/t19771035/aaaabdhx.tel
Line Count: 106
Litigation Code IDs:
Litigation Codes:
Litigation History:
Locator: TEXT ON-LINE, ON MICROFILM
Message ID: 5ac69c29-c288-dd11-92da-001cc4696bcc
Office: ACTION AF
Original Classification: LIMITED OFFICIAL USE
Original Handling Restrictions: n/a
Original Previous Classification: n/a
Original Previous Handling Restrictions: n/a
Page Count: 2
Previous Channel Indicators: n/a
Previous Classification: LIMITED OFFICIAL USE
Previous Handling Restrictions: n/a
Reference: n/a
Retention: 0
Review Action: RELEASED, APPROVED
Review Content Flags:
Review Date: 09-Feb-2005 12:00:00 am
Review Event:
Review Exemptions: n/a
Review Media Identifier:
Review Release Date: n/a
Review Release Event: n/a
Review Transfer Date:
Review Withdrawn Fields: n/a
SAS ID: 835400
Secure: OPEN
Status: NATIVE
Subject: EFFECT OF BANNING ON BCP PROJECTS AND PERSONNEL
TAGS: PINT, SHUM, SF
To: STATE
Type: TE
vdkgvwkey: odb://SAS/SAS.dbo.SAS_Docs/5ac69c29-c288-dd11-92da-001cc4696bcc
Review Markings:
Margaret P. Grafeld
Declassified/Released
US Department of State
EO Systematic Review
22 May 2009
Markings: Margaret P. Grafeld Declassified/Released US Department of State EO Systematic Review 22 May 2009